

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	D.B.	2005	10-9-99
O.I.P.E. CLASSIFIER	8		12-20-99
FORMALITY REVIEW	61001		3/20/00
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Final	Original	Date
1	✓	✓	7/1/00
2	O	✓	7/1/00
3	✓	✓	7/1/00
4	O	O	7/1/00
5	✓	✓	7/1/00
6	✓	✓	7/1/00
7	O	✓	7/1/00
8	✓	✓	7/1/00
9	O	O	7/1/00
10	O	✓	7/1/00
11	✓	✓	7/1/00
12	O	O	7/1/00
13	✓	✓	7/1/00
14	✓	✓	7/1/00
15	✓	✓	7/1/00
16	✓	✓	7/1/00
17	O	O	7/1/00
18	O	✓	7/1/00
19	✓	✓	7/1/00
20	O	O	7/1/00
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If more than 150 claims or 10 actions  
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